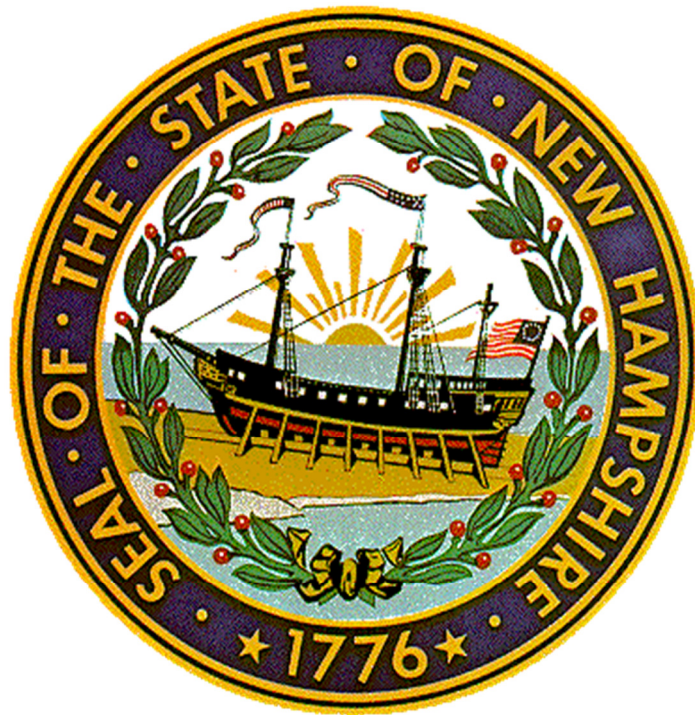


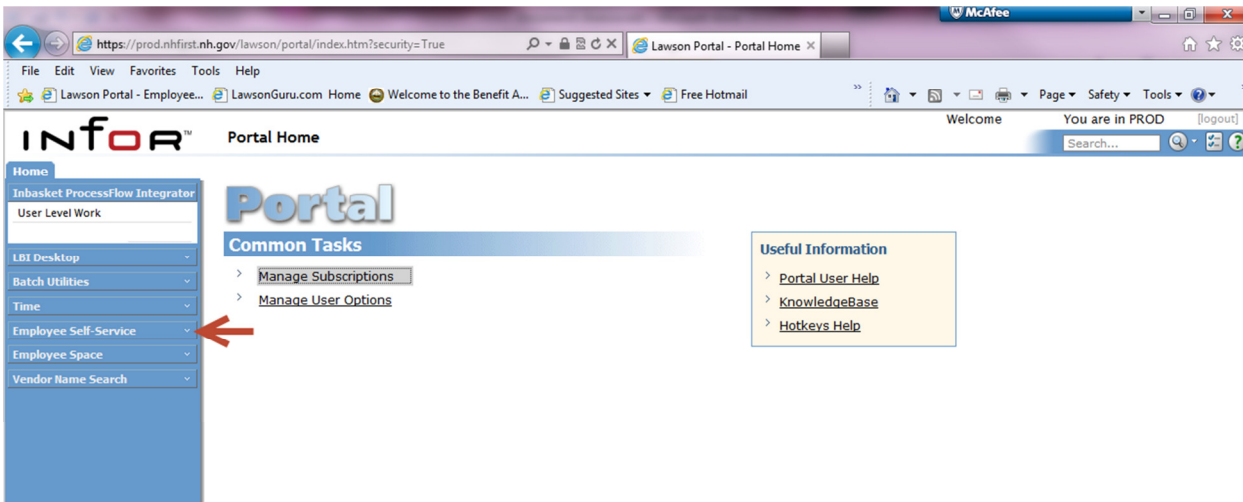
NH FIRST

EMPLOYEE SELF SERVICE (ESS)

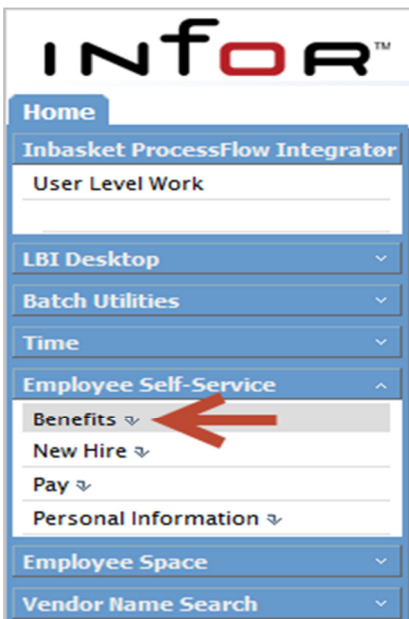


How to Review, Download and Print Your Current Benefit Coverage

Once you are logged into NH FIRST, you will arrive on the "Portal Home" page. Click on **Employee Self-Service** bookmark on the left side of the screen to access your **Current Benefits**.



Then click on **Benefits** in the drop down.



The system will take you to the **Current Benefits** screen and will display your benefit plans and coverage you are enrolled in as of the date you go to this screen. This screen will only display your enrollment in New Hampshire Retirement System (NHRS), Medical (HMO or POS), Dental and Flexible Spending (FSA) Benefits (Medical and/or Dependent Child Care) if applicable.

Note: If you did not enroll in FSA benefits for the 2014 plan year or if you waived your coverage you may not see your enrollment in a Waive plan for that benefit. This portion of your Current Benefits may be blank. If it is blank, it is assumed that you waived that benefit for the current plan year.

INfor

Welcome You are in PROD [logout]

Search...

Home Benefits

Benefits

Parent Menu

Current Benefits

Flexible Spending

LAWS IN Current Benefits

Welcome, Christina Williams

Benefit Plans and Coverage

Type of Plan	Plan	Coverage	Pre-Tax Cost	After-Tax Cost	Company Cost
Defined Benefit	NHRS CLASSIFIED EE PLAN		7.00%		12.13%
Dental	DENTAL PLAN	EE + Family	3.00		60.25
Dependent Spouse					
Dependent Child					
Employee Life	PLAN 1 BASIC PLAN	Employee 25,000.00			0.52
Health	HMO MEDICAL PLAN	EE + Family	60.00		851.25
Dependent Spouse					
Dependent Child					
Spending Account	MEDICAL SPEND	1,500.00 per year	57.70		
Spending Account	WAIVE CHILDCARE				

Print

If you would like to print a copy of your **Current Benefits**, you can click on **Print**, choose your printer you want to print to and click on **Print**.

Print

General Options

Select Printer

DAS-CON-ANX-RISK-403-C on hzngmvp1

Microsoft XPS Document Writer

HP LaserJet P2015 PCL6

Status: Ready

Location:

Comment:

Page Range

All

Selection

Current Page

Pages: 1

Enter either a single page number or a single page range. For example, 5-12

Number of copies: 1

Collate

Print

Cancel

Apply

LAWS IN Current Benefits

Welcome, Christina Williams

Type of Plan	Plan	Coverage	Pre-Tax Cost	After-Tax Cost	Company Cost
Defined Benefit	NHRS CLASSIFIED EE PLAN		7.00%		12.13%
Dental	DENTAL PLAN	EE + Family	3.00		60.25
Dependent Spouse					
Dependent Child					
Employee Life	PLAN 1 BASIC PLAN	Employee 25,000.00			0.52
Health	HMO MEDICAL PLAN	EE + Family	60.00		851.25
Dependent Spouse					
Dependent Child					
Spending Account	MEDICAL SPEND	1,500.00 per year	57.70		
Spending Account	WAIVE CHILDCARE				

Print

The print out will contain the following information:

Employee Name:
Employee Number:

Type of Plan	Plan	Coverage	Pre-Tax Cost	After-Tax Cost	Company Cost
Defined Benefit	NHRS CLASSIFIED EE PLAN		7.00%		12.13%
Dental	DENTAL PLAN	EE + Family	3.00		60.25
Dependent Spouse Dependent Child					
Employee Life	PLAN 1 BASIC PLAN	Employee 25,000.00			0.52
Health	HMO MEDICAL PLAN	EE + Family	60.00		851.25
Dependent Spouse Dependent Child					
Spending Account	MEDICAL SPEND	1,500.00 per year	57.70		
Spending Account	WAIVE CHILDCARE				

You have completed viewing, downloading and printing your current benefits coverage for yourself and your dependents for health, dental, flexible spending (medical and dependent child care) and NH Retirement System.